



Bib Data Sheet

CC

SERIAL NUMBER 09/687,267	FILING DATE 10/13/2000 RULE	CLASS 514	GROUP ART UNIT 1642
------------------------------------	---	---------------------	-------------------------------

APPLICANTS

Jeffrey Glenn, Palo Alto, CA;

**** CONTINUING DATA *******

This application is a DIV of 09/028,655 02/24/1998 PAT 6,159,939
which is a CON of 08/347,448 06/23/1995 PAT 5,876,920
which is a 371 of PCT/US93/05247 06/01/1993
which is a CIP of 07/890,754 05/29/1992 PAT 5,503,973

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY ****
** 12/11/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 4	TOTAL CLAIMS 9	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS
25225

TITLE

METHOD FOR INHIBITION OF VIRAL MORPHOGENESIS

FILING FEE RECEIVED 355	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit _____



Bib Data Sheet

SERIAL NUMBER 09/687,267	FILING DATE 10/13/2000 RULE	CLASS 514	GROUP ART UNIT 1642
------------------------------------	---	---------------------	-------------------------------

APPLICANTS

Jeffrey Glenn, Palo ALto, CA;

**** CONTINUING DATA *******

This application is a DIV of 09/028,655 02/24/1998 PAT 6,159,939
which is a CON of 08/347,448 06/23/1995 PAT 5,876,920
which is a 371 of PCT/US93/05247 06/01/1993
which is a CIP of 07/890,754 05/29/1992 PAT 5,503,973

**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED SMALL ENTITY****

** 12/11/2000

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 4	TOTAL CLAIMS 9	INDEPENDENT CLAIM 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

25225

TITLE

METHOD FOR INHIBITION⁵ OF VIRAL MORPHOGENESIS

FILING FEE RECEIVED
355

FEES: Authority has been given in Paper
No. _____ to charge/credit DEPOSIT ACCOUNT
No. _____ for following:

<input type="checkbox"/> All Fees	
<input type="checkbox"/> 1.16 Fees (Filing)	
<input type="checkbox"/> 1.17 Fees (Processing time)	of
<input type="checkbox"/> 1.18 Fees (Issue)	
<input type="checkbox"/> Other _____	
<input type="checkbox"/> Credit	